

DECLARATION AND POWER OF ATTORNEY - ORIGINAL APPLICATION

Attorney's Docket No.
202-0310

As a below named inventor, I hereby declare:
My residence, post office address and citizenship are as stated below next to my name;

I verily believe I am the original, first and sole inventor or an original, first and joint inventor of the subject matter that is claimed for which a patent is sought on the invention entitled

METHOD OF SPRAY JOINING ARTICLES

the specification of which is attached hereto.

I have reviewed and understand the contents of the specification identified above, including the claims.

I acknowledge my duty to disclose information of which I am aware that is material to the examination of this application in accordance with Section 1.56(a), Title 37 of the Code of Federal Regulations; and as to application for patents or inventor's certificate on the invention filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns,

- ☒ no such applications have been filed, or
- ☐ such applications have been filed as follows:
- ☐ I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

COUNTRY	APPLICATION NO.	DATE OF FILING (month, day, year)	DATE OF ISSUE (month, day, year)	PRIORITY CLAIMED UNDER 35 USC 119	<input type="checkbox"/> Additional provisional application numbers are on a separate priority data sheet PTO/SB/02B attached here

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which becomes available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Number) (Filing Date) (Status - patented, pending, abandoned)

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POWER OF ATTORNEY: - I/we hereby appoint the following Practitioners: Customer No. 28395, Michael S. Brodbine - 36 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office and all foreign Patent Offices.

Attorney Docket No: 202-0310

Please call 313-322-7725 if this paper becomes separated from the file.

Address all correspondence and telephone calls to:

Michael S. Brodbine
Brooks & Kushman
1000 Town Center Twenty-Second Floor
Southfield, MI 48075-1351 Phone: 248-358-4400

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of application or any patent issuing thereon.

NAME AND MAILING ADDRESS OF INVENTOR:	RESIDENCE	CITIZENSHIP	SIGNATURE	DATE
Grigoriy Grinberg 4758 Mount Alry Sylvania, OH 43560 US	Sylvania, OH 43560 US	U.S.A	<i>Gr. Grinberg</i>	8/1
Matthew M. Shade 12831 Wendover Drive Plymouth, MI 48170 US	Plymouth, MI 48170 US	U.S.A	<i>Matthew M. Shade</i>	8/1
Dave Robert Collins 3272 Surrey Drive Saline, MI 48176 US	Saline, MI 48176 US	U.S.A		

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NAME AND MAILING ADDRESS OF INVENTOR:	RESIDENCE	CITIZENSHIP	SIGNATURE	DATE
Grigoriy Grinberg 4758 Mount Airy Sylvania, OH 43560 US	Sylvania, OH 43560 US	Russia		
Matthew M. Shade 12831 Wendover Drive Plymouth, MI 48170 US DAVID D.R.C.	Plymouth, MI 48170 US	U.S.A		
Dave Robert Collins 3272 Surrey Drive Saline, MI 48176 US	Saline, MI 48176 US	U.S.A	<i>Dave R Collins</i>	8-5

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